



PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL  
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Application Number	09/768,007
Filing Date	01/24/2001
First Named Inventor	SANJAY CHADHA
Art Unit	2685
Examiner Name	LE, NHANT
Attorney Docket Number	AP835US

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450****RECEIVED**

DEC 17 2003

Technology Center 2600

Please withdraw me as attorney or agent for the above identified patent application, and

☒ all the attorneys/agents of record.☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☐ the attorneys/agents associated with Customer Number **RECEIVED**

JAN - 6 2004

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

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The reasons for this request are:

**CORRESPONDENCE ADDRESS**1. ☐ The correspondence address is NOT affected by this withdrawal.2. ☒ Change the correspondence address and direct all future correspondence to: SANJAY CHADHA☐ Customer Number: 20 KENTSDALE DRIVE  
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OR

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Individual Name

Address

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SANJAY CHADHA

Signature

*Sanjay Chadha*

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Date

NOV 30, 2003

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613-226-4764

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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